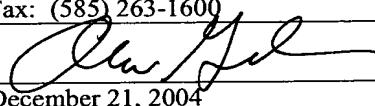




TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/596,958
		Filing Date	June 20, 2000
		First Named Inventor	Kim et al.
		Group Art Unit	1638
		Examiner Name	Anne R. Kubelik
Total Number of Pages in This Submission	2	Attorney Docket Number	

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply (\$ _____) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (\$ _____) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$ _____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$ _____) <input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$ _____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$ _____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Notice of Appeal and Request for Three-Month Extension of Time) (\$760) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i> : <input checked="" type="checkbox"/> Check in the amount of \$ <u>760</u>
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Andrew K. Gonsalves Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1658 Fax: (585) 263-1600	
Signature		
Date	December 21, 2004	
Registration No. 48,145		

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Docket No.: 19603/3286 (CRF D-2062B)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Kim et al.)	Examiner:
Serial No.	:	09/596,958)	Anne R. Kubelik
Cnfrm. No.	:	5427)	Art Unit:
Filed	:	June 20, 2000)	1638
For	:	DNA ENCODING <i>ERWINIA AMYLOVORA</i> HYPERSENSITIVE RESPONSE ELICITOR AND ITS USE)	

**NOTICE OF APPEAL
AND
REQUEST FOR THREE-MONTH EXTENSION OF TIME**

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Dear Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the Primary Examiner's decision dated June 21, 2004, finally rejecting claims 40-48.

Applicants hereby request an extension of time of three months from the due date of September 21, 2004.

Enclosed is a check in the amount of \$760, which covers the \$250 cost of the appeal fee and the \$510 cost of the extension of time. Please charge any additional fees which may be required or credit any overpayment to Deposit Account No. 14-1138. A duplicate copy of this form is attached.

Respectfully submitted,



Andrew K. Gonsalves
Registration No. 48,145

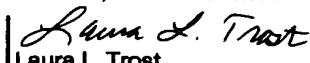
12/28/2004 AWONDAF1 00000100 09596958

01 FC:2401 250.00 OP
02 FC:2253 510.00 OP

Dated: December 21, 2004

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